PAGE 1/5 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Friends of David Schweikert 228 S Washington Street ADDRESS (number and street) Ste 115 (Check if address is changed) Alexandria 22314-5404 VACITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS .imiller@hdafec.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) http://www.davidschweikert.com/ (Check if address is changed) DATE 2014 C00540617 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Julia C. Miller Type or Print Name of Treasurer Julia C. Miller [Electronically Filed] 10 2014 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use